

# P O Box 88 Cambridge ID 83610

#### REDACTED- FOR PUBLIC INSPECTION

October 23, 2013

#### VIA OVERNIGHT DELIVERY

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12<sup>th</sup> Street, S.W. Washington, DC 20554

RE: <u>Confidential Financial Information Subject to Protective Order in WC Docket Nos.</u>

10-90, 07-135, 05-337, 03-109, CC Docket Nos. 01-92, 96-45, GN Docket No. 09-51,

WT Docket No. 10-208, Before the Federal Communications Commission

Dear Ms. Dortch:

Cambridge Telephone Co., Inc., a privately-held rate of return carrier receiving high cost support, has electronically submitted FCC Form 481 to the Commission with redacted financial data, in compliance with 47 C.F.R. §§ 54.313 and 54.422

As specified in the Protective Order issued on November 16, 2012 by the Commission, two copies of the redacted confidential information are being filed simultaneously with the non-redacted confidential information. The redacted information for this filing and each page of the file where confidential information has been omitted is marked "REDACTED - FOR PUBLIC INSPECTION"

Please feel free to contact me with any questions regarding this particular matter.

Richard Wiggin S

Richard Wiggins

Cambridge Telephone Co., Inc.

Enclosures

.cc Mr. Charles Tyler, FCC Telecommunications Access Policy Division

FCC For	m 481 - Carrier Annual Reporting	FCC Forn	1 481 1 1 481 No. 3050-0986/QM8 Control No. 3050-0819
	llection Form	Joly 2013	
<010>	Study Area Code 4	72215	
<015>	Study Area Name	CAMBRIDGE TEL CO	
<020>	Program Year	2014	
<030>	Contact Name: Person USAC should contact with questions about this data	Richard Wiggins	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	(208) 257-3314	
<039>	Contact Email Address: Email of the person identified in data line <030>	rwiggins@ctctele.com	
A Secretary of the Control of the Co			54,313 54.422
ANNUA	L REPORTING FOR ALL CARRIERS		Completion Completion Required
<100>	Service Quality Improvement Reporting	(complete attached worksheet)	(check box when complete)
<200>	Outage Reporting (volce)	(complete attached worksheet)	<u> </u>
<210>	< check box if n	o outages to report	
	Unfulfilled Service Requests (voice)	0	
<310>	Detail on Attempts (voice)	(attoch descriptive document)	
<320> <330>	Unfulfilled Service Requests (broadband)  Detail on Attempts (broadband)	(attach descriptive document)	/
<400>	Number of Complaints per 1,000 customers (volce)		<b>✓ ✓</b>
<410>	Fixed 1.86		
<420> <430>	Mobile 0.0  Number of Complaints per 1,000 customers (broad	l	/
<440>	Fixed	Sandy	
<450>	Mobile		
<500>	Service Quality Standards & Consumer Protection R	ules Compliance (check to indicate certification)	<b>/</b> /
<510>	4722151d500	(attached descriptive document)	<b>V V</b>
<600>	Functionality in Emergency Situations	(check to indicate certification)	<del></del>
<610> <700>	4722151d600 Company Price Offerings (voice)	(attached descriptive document) (complete attached worksheet)	
<710>	Company Price Offerings (broadband)	(complete attached worksheet)	7
	Operating Companies and Affiliates	(complete attached worksheet)	<u> </u>
	Tribal Land Offerings (Y/N)?	(if yes, complete attached worksheet)	<b>✓ NEW YORK</b>
	Voice Services Rate Comparability	(check to indicate certification)	
<1010>		(attach descriptive document)	
<1100> <1110>	Terrestrial Backhaul (Y/N)?	(if not, check to indicate certification)	
	Terms and Condition for Lifeline Customers	(complete attached worksheet) (complete attached worksheet)	
			The printing appropriate to the second secon
	Price Cap Carriers, Proceed to Price Cap Additional		
<2000>	including Rate-of-Return Carriers offiliated with Pri	ce Cap Local Exchange Carriers  (check to indicate certification)	
<2005>		(complete attached worksheet)	
	Rate of Return Carriers, Proceed to ROR Additiona	Documentation Worksheet	
<3000>		(check to Indicate certification)	
<3005>		(complete attached worksheat)	<b>/</b>

Study Area Code   47:20115   Study Area Name   Commander Feb. co   Colorate Name - Person USAC should contact regarding this data   Richard sitigatus   Richard sitigatus   Richard sitigatus   Contact Telephone Number - Number of person identified in data line 40305   Contact Telephone Number - Number of person identified in data line 40305   Contact Telephone Number - Number of person identified in data line 40305   Contact Telephone Number - Number of person identified in data line 40305   Contact Telephone Number - Number of person identified in data line 40305   Contact Telephone Number - Number of person identified in data line 40305   Contact Telephone Number - Number of person identified in data line 40305   Contact Telephone Number - Number of Number -	Data Co	ervice Quality Improvement Reporting Illection Form	FCC Form 481. OMB Control No. 3060-0986/OMB Control No. 3060-0819
<ul> <li>Study Area Cobe</li> <li>4015 Study Area Name</li> <li>Contact Name - Person USAC should contact regarding this data</li> <li>Richard Biggins</li> <li>4030 Contact Name - Person USAC should contact regarding this data</li> <li>Richard Biggins</li> <li>Richard Biggins</li> <li>Contact Telephone Number - Number of person identified in data line &lt;0300 (2001) 2301-237-3114</li> <li>4039 Contact Email Address - Email Address of person identified in data line &lt;0300 (2001) 2501-2501-2501</li> <li>If your answer to Line &lt;110&gt; is yes, do you have an existing \$54.202(a) "5</li> <li>(yes / no )</li></ul>	Landinde (1916)	astanaanan ja suutana saanan van ja saatalahiin joon kiiro katanassa saanastanassa ja mula	<u>July</u> 2013
CO200   Program Year   2014	<010>	Study Area Code 4723	15
Contact Name - Person USAC should contact regarding this data  Richard Migrins  Contact Telephone Number - Number of person identified in data line <030> 12081357-3314  Contact Email Address - Email Address of person identified in data line <030> roviopsins@ctcctolo.com  If your answer to Line <110> is yes, do you have an existing \$54.202(a) "5  (yes / no)  If your answer to Line <110> is yes, do you have an existing \$54.202(a) "5  (yes / no)  If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing \$54.202(a) "5  4112> year plan" filed with the FCC, as it relates to your provision of voice telephony service.  4112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. \$54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.  Please check these boxes below to confirm that the attached PDF, on line  112, contains a progress report on its five-year service quality improvement plan pursuant to \$54.202(a). The information shall be submitted at the wire center level or census block as appropriate.  Attach Flow (USF) was used to improve service (USF) support was received  4113> Maps detailing progress towards meeting plan targets  4114> Report how much universal service (USF) support was received  4115- How (USF) was used to improve service coverage  4116- How (USF) was used to improve service coverage  4117- How (USF) was used to improve service coverage  4118> Provide an explanation of network improvement targets not met	<015>	Study Area Name CANE	BRIDGE TEL CO
<ul> <li>Contact Telephone Number - Number of person identified in data line &lt;030&gt; (208) 257-3314</li> <li>Contact Email Address - Email Address of person identified in data line &lt;030&gt; (208) (257-3314)</li> <li>Contact Email Address - Email Address of person identified in data line &lt;030&gt; (208) (257-3314)</li> <li>Has your company received its ETC certification from the FCC? (yes / no) (yes / no) (lives / 110) (yes / no) (lives / 110) (yes / no) (</li></ul>	<020>	Program Year 2	2014
Contact Email Address - Email Address of person identified in data line <030> rvtogalnalecteroto.com  <110> Has your company received its ETC certification from the FCC? (yes / no)	<030>	Contact Name - Person USAC should contact regarding this data	Richard Wiggins
<ul> <li>&lt;110&gt; Has your company received its ETC certification from the FCC? (yes / no )</li></ul>	<035>	Contact Telephone Number - Number of person identified in data line <0	30> (208)257-3314
If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?  If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.  **This is your annual progress report filed pursuant to 47 C.F.R. § 54.3.13(a)(1). If your company is a CETC which only receives frozen support, your progress report filed pursuant to 47 C.F.R. § 54.3.13(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.  **Name of Attached Document (.pdf)**  Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.  **Ala3** Maps detailing progress towards meeting plan targets  **I13** Maps detailing progress towards meeting plan targets  **I14** Report how much universal service (USF) support was received  **I15** How (USF) was used to improve service coverage  **I16** How (USF) was used to improve service capacity  **I17** How (USF) was used to improve service capacity  **I18** Provide an explanation of network improvement targets not met	<039>	Contact Email Address - Email Address of person identified in data line <0	030> rwiggins@ctctele.com
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<114> Report how much universal service (USF) support was received <115> How (USF) was used to improve service quality <116> How (USF)was used to improve service coverage <117> How (USF) was used to improve service capacity <118> Provide an explanation of network improvement targets not met		112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the way.	ent
<115> How (USF) was used to improve service quality <116> How (USF)was used to improve service coverage <117> How (USF) was used to improve service capacity <118> Provide an explanation of network improvement targets not met	<113>	Maps detailing progress towards meeting plan targets	
<116> How (USF)was used to improve service coverage <117> How (USF) was used to improve service capacity <118> Provide an explanation of network improvement targets not met	<114>	Report how much universal service (USF) support was received	
<117> How (USF) was used to improve service capacity <118> Provide an explanation of network improvement targets not met	<115>	How (USF) was used to improve service quality	
<118> Provide an explanation of network improvement targets not met	<116>	How (USF)was used to improve service coverage	
1 1	<117>	How (USF) was used to improve service capacity	
	<118>		

(200) Service Outage Reporting (Voice)		FCC Form 481
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	472215					
<015>	Study Area Name	CAMERIDGE TEL CO					
<020>	Program Year	2014					
<030>	Contact Name - Person USAC should contact regarding this data	Richard Wiggins					
<035>	Contact Telephone Number - Number of person identified in data line <030> (208) 257-3314						
<039>	Contact Email Address - Email Address of person identified in data line <030> rwlggins0ctctele.com						

<220>	<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d>&gt;</d>	<e></e>	<f></f>	<g></g>	<h>&gt;</h>
	NORS									Did This Outage		
	Reference	Outage Start	Outage Start	Outage End	Outage End	Number of		911 Facilities	Service Outage	Affect Multiple		
	Number	Date	Time	Date	Time	Customers Affected	Total Number of	Affected	Description (Check		Service Outage	Preventative
			i				Customers	(Yes / No)	all that apply)	(Yes / Na)	Resolution	Procedures
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Page 4

ECC. Form (881) OMB. Control No. 3060-0386/OMB. Control No. 3060-0819									Mandatory Extended Area  Total ner line Bates and Eeo													
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		3E TEL CO		Wiggins	3314	rwiggins@ctctele.com	y	ŽĘ 9	State Subscriber Line Charge						see attached worksheet							
	472215	CAMBRIDGE TEL	2014	Richard Wiggins	line <030> (208) 257-3314	<030> rwlgginsec	1/1/2013		Residential Local Service Rate					Č	See al	-						
				ding this data		entified in data line	1/1		Rate Type													
And the second control of the second control				d contact regard	er of person ide	ass of person id	ective Date Service Charge		SAC (CETC)													
(700) Price Offerings Including Voice Rate Data Data Collection Form	ode	ame		Contact Name - Person USAC should contact regarding this data	Contact Telephone Number - Number of person identified in data	Contact Email Address - Email Address of person identified In data line <030>	Residential Local Service Charge Effective Date Single State-wide Residential Local Service Charge		Exchange (ILEC)													
cel Offerings in Percentage in	Study Area Code	Study Area Name	Program Year	Contact Nam	Contact Telep	Contact Emai	Residential Lo Single State-w		State													ļ
700 Pri	<010>	415	<020>	\$ \$	<035>	<b>€69</b>	<707>	<703>									•	•	 1_	 1	_ !	 ļ

Page 5

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OMR CORRIG NO. 3060-0118						44	Usage Allowance Action Taken When	Francis and an array												
FCC Form 4811 OMB Cantrol No. 3060-0986/OMB Control No. 10/W2015						<b>*************************************</b>	Usage Allowance	lant.												
FCC FORM COMPLETE TO THE PROPERTY SOLIS							Broadband Service - Upload Speed (Whos)	7-1-11												
							Broadband Service - Download Speed (Mbos)													
			i		com		Total Rate and Fees													
1.5	CAMBRIDGE TEL CO	1	Richard Wiggins	(208)257-3314	rwigginsectotele.com		State Regulated Fees					See attached	worksheet							
4772215	CAME	3014	מו	ata line <030>	: 1		Residential Rate					See	works							
			Contact Name - Person USAC should contact regarding this dat	Contact Telephone Number - Number of person identified in data line <030>	Contact Email Address - Emall Address of person identified in data line <030>		Exchange (ILEC)													
V. J. J. Story Area Code				Cantact Telephone Numbe	Contact Email Address - En.		State													
Data Colle	<015>	<020>	<030>	<035>	<039	<711>														

<010>	Study Area Code	472215
<015>	Study Area Name	CANBRIDGE TEL CD
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Richard Wiggins
<035>	Contact Telephone Number - Number of person identified in data line <03	30> (208)257-3314
<039>	Contact Email Address - Email Address of person identified in data line <0	30> rwiggins@ctctele.com
<810>	Reporting Carrier Cambridge Telephone Co, Inc	
<811>	Holding Company	
<812>	Operating Company	

13> Affiliates	SAC	Doing Business As Company or Brand Designation
	- See attached workshee	t

Data Col	bal Lands Reporting lection Form	FCC Form 481  OMB Control No. 3060-0986/OMB control No. 3060-0819  July:2013
<010> <015> <020>	Study Area Code Study Area Name Program Year	472215  CAMBRIDGE TEL CO 2014  Richard Wiggins
<030> <035>	Contact Name - Person USAC should contact regarding this data  Contact Telephone Number - Number of person identified in data line	
<039>	Contact Email Address - Email Address of person identified in data line	
<910>	Tribal Land(s) on which ETC Serves	
<920>	Tribal Government Engagement Obligation	Name of Attached Document (.pdf)
	If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:	
		Select (Yes,No, NA)
<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions;	
<922>	Feasibility and sustainability planning;	
<923>	Marketing services in a culturally sensitive manner;	
<924>	Compliance with Rights of way processes	
<925>	Compliance with Land Use permitting requirements	
<926>	Compliance with Facilities Siting rules	
<927>	Compliance with Environmental Review processes	
<928>	Compliance with Cultural Preservation review processes	
<929>	Compliance with Tribal Business and Licensing requirements.	

110000000000000000000000000000000000000	o Terrestrial Backhaul Reporting ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>		472215
<015>	Study Area Code Study Area Name	CAMBRIDGE TEL CO
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Richard Wiggins
<035>	Contact Telephone Number - Number of person identified in data line <030>	(208) 257-3314
<039>	Contact Email Address - Email Address of person identified in data line <030>	rwiggins@ctctele.com
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)	
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)	

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Lifeline	rms and Condition for Lifeline Customers ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		472215
<015>	Study Area Name		CAMBRIDGE TEL CO
<020>	Program Year		2014
<030>	Contact Name - Person USAC should contact regarding this data		Richard Wiggins
<035>	Contact Telephone Number - Number of person identified in data ii	ne <030:	(208) 257-3314
<039>	Contact Email Address - Email Address of person identified in data	ine <030	> rwiggins@ctctele.com
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	Ī	472215101210  Name of attached document (.pdf)
<1220>	Link to Public Website	НТТР_	
	"Please check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:		
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	<b>V</b>	
<1222>	Details on the number of minutes provided as part of the plan,	<b>V</b>	
<1223>	Additional charges for toli calls, and rates for each such plan.	<b>/</b>	

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Collicion   Contact Final Corriers   Contact Final Contact Final Corriers   Contact Final Corriers   Contact Final Corriers   Contact Final Address of person identified in data line <030> Contact Email Address of person identified in data line <030> Contact Email Address of person identified in data line <030> Contact Email Address of person identified in data line <030> Contact Contact Email Address of person identified in data line <030> Contact Contact Email Address of person identified in data line <030> Contact Email Address of person identified in data line <030> Contact Email Address of person identified in data line <030> Contact Email Address of person identified in data line <030> Contact Email Address of person identified in data line <030> Contact Email Address of person identified in data line <030> Contact Email Address of person identified in data line <030> Contact Email Address of person identified in data line <030> Contact Email Address of person identified in data line <030> Contact Email Address of person identified in data line <030> Contact Email Address of person identified in data line <030> Contact Email Address of person identified in data line <030> Contact Email Address of person identified in data line <030> Contact Email Contact Email Address of Denson identified in data line <030> Contact Email Contact Em	Color   Study Area Code
CAMI CAMI 2014 e Number - Number of person identified in data line <030> dress - Email Address of person identified in data line <030>	TEL CO STATUS ST-1314 INMENIUM CONTRACTORY INMENIUM CONTRACTORY INMENIUM CONTRACTORY IS SUPPORT, Frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II ormation reported on this form and in the documents attached below is accurate.
Study Area Name Program Year  Contact Name - Person USAC should contact regarding this data 3.01.4  Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	тет. со 57-3314 ла8стсте1е. сом виманиянициникаваниянияниянияниянияниянияниянияния I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II ormation reported on this form and in the documents attached below is accurate.
Program Year  Contact Name - Person USAC should contact regarding this data Rich Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	57-3314 львостсте1е. сом виманияничения интегнативнативнативнативнативнативнативнатив
Contact Name - Person USAC should contact regarding this data RICH Contact Telephone Number - Number of person identified in data line <030>Contact Email Address - Email Address of person identified in data line <030>	57-3314 ль8стсте1е. сом пвижищитикиванициалиниданициалиниданициалинициал
Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	57-3314 na8ctctele.com namenummunammunummunammunummunummunummun
Contact Email Address - Email Address of person identified in data line <030>	львостстейе.com виманиспринципишавания приментация применения применения применения применения применения применения применения I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II ormation reported on this form and in the documents attached below is accurate.
	indemical information of the Cost support, High Cost support to offset access charge reductions, and Connect America Phase II primation reported on this form and in the documents attached below is accurate.
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Incremental Connect America Phase I reporting	
ZNO TEST CEITHEAUDN (47 CFR 9 54.31.3(0)(1))	
3rd Year Certification (47 CFR § 54.313(b)(2))	
Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))	
2013 Frozen Support Certification	
2014 Frozen Support Certification	
2015 Frozen Support Certification	
2016 and future Frozen Support Certification	
Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}	
Connect America Phase II Reporting (47 CFR § 54.313(e))	
3rd year Broadband Service Certification	
5th year Broadband Service Certification	
Interim Progress Certification	
Please check the box to confirm that the attached PDF, on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a reciplent	
or car raisse it support stial provide the humber, names, and addresses of community anchor institutions to which began providing access to broadband	
Interim Progress Community Anchor Institutions	Name of Attached Document Listing Required Information

	ate Of Return Carrier Additional Documentation lection Form		FCC Form 481.  OMB Control No. 3060-9386/OMB Control No. 3060-9819  July 2013
	472215		
<010> <015>	Study Area Code CAMBRIDGE	TEL CO	
<020>	Program Year 2014		
<0E0>		hard Wiggins	
<035>	Contact Telephone Number - Number of person Identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	(208)257-3314 rwiggins@ctctele.com	,
manun	naunummennammaanummennamumennammannammennammennammennammen the baxes below to note compliance on its five year service quality plan (pursua CFR § 54.313(f)(2). I further certify that ti	ការណ៍របស់រាយការស្រួរក្រុមក្រុមក្រុមក្រុមក្រុមក្រុមក្រុមក្រុ	compliance with the financial reporting requirements set forth in 47
	Progress Report on 5 Year Plan		
(3010)	Milestone Certification (47 CFR § 54.313(f)(1)(i)) Please check this box to confirm that the attached PDF, on line 3012,	Name of Attached Document Listing Required Information	
(3011)	contains the required information pursuant to § 54.313 ([i][1](ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.		
(3012) (3013) (3014)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii)) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) If yes, does your company file the RUS annual report Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:	Name of Attached Dosument Listing Required Information	[Yes/No]
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		
(3016)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		
(3017)	If the response is yes on line 3014, attach your company's RUS annual		472215TD3G17
(3018)	report and all required documentation  If the response is no on line 3014, is your company audited?	Name of Attached Document Listing Required Information	(Yes/No)
<b>,,</b>	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)[2], contains:		
(3019)	Either a copy of their audited financial statement; or (2) a financial report		
(3020)	In a format comparable to RUS Operating Report for Telecommunications PDF of Balance Sheet, Income Statement and Statement of Cash Flows		
(3021)	Management letter issued by the independent certified public accountant that performed the company's financial audit.		
(3022)	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54,313(f)(2), contains:  Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to BUS Operating Report for Telecommunications		
	Borrowers, Underlying information subjected to a review by an independent certified		
(3023)	bupic accountant		
(3024)	Underlying information subjected to an officer certification.		<b>✓</b>
(3025)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	4722151D3026

Certificat Data Coll	ion = Reporting Cari ection Form	ler . FCC Form 481 OMB Control No. 3050-0986/OMB Control No. 3050-0819 July:2013		
<010>	Study Area Code	472215		
<015>	Study Area Name	CAMBRIDGE TEL CO		
<020>	Program Year	2014		
<030>	Contact Name - Per	on USAC should contact regarding this data Richard Wiggins		
<035>	<035> Contact Telephone Number - Number of person identified in data line <030> (208) 257-3314			
<039>	Contact Fmail Addre	esc Fmail Address of person identified in data line <0305		

## TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

l certify that I am an officer of the reporting carrier; my responsibilities reciplents; and, to the best of my knowledge, the information reported	Include ensuring the accuracy of the annual reporting requirements for universal service support ion this form and in any attachments is accurate.
Name of Reporting Carrier: CAMBRIDGE TRL CO	
Signature of Authorized Officer. CERTIFIED ONLINE	Date
Printed name of Authorized Officer: Richard Wiggins	
Title or position of Authorized Officer: President	
Telephone number of Authorized Officer: (208) 257-8224	
Study Area Code of Reporting Carrier: 472215	Filing Due Date for this form: 10/15/2013

Certificat Data Coll	tion - Agent / Carrier ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	472215	
<015>	Study Area Name	CAMBRIDGE TEL CO	
<020>	Program Year	2014	
<030>	Contact Name - Person	USAC should contact regarding this data Ric	ichard Wiggins
<035>	Contact Telephone Nur	mber - Number of person Identified in data line <03	30> {208}257-3314
<039>	Contact Email Address	- Email Address of person identified in data line <03	)30> rwigginsActctele.com

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier certify that (Name of Agent) is authorized to submit the information reported on behalf of the reporting carrier, iso certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized gont; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.			
Name of Reporting Carrier:			
Signature of Authorized Officer:		Date:	
Printed name of Authorized Officer:			
Title or position of Authorized Officer:			
Telephone number of Authorized Officer:			
Study Area Code of Reporting Carrier:	Filing Due Date for this form:		
Persons willfully making false statements on this form can	be punished by fine or forfeiture under the Communications Act of 1934 under Title 18 of the Whited States Code, 18 U.S.C. § 1001.	t, 47 U.S.C. §§ 502, 503(b), or fine or Imprisonment	

## TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier			
	rized to submit the annual reports for universal service support re porting carrier; and, to the best of my knowledge, the information		
Name of Reporting Carrier:			
Name of Authorized Agent or Employee of Agent:			
Signature of Authorized Agent or Employee of Agent:		Date:	
Printed name of Authorized Agent or Employee of Agent:			
Title or position of Authorized Agent or Employee of Agent			
Telephone number of Authorized Agent or Employee of Ager	nt:		
Study Area Code of Reporting Carrier:	Filing Due Date for this form:		
Persons willfully making false statements on this form o	an be punished by fine or forfeiture under the Communications Act of 19 18 of the United States Code, 18 U.S.C. § 1001.	34, 47 U.S.C. 55 502, 503(b), or fine or imprisonment under Title	

Attachments

## SAC 47-2215

# Service Quality Standards & Consumer Protection Rules Compliance

Form 481 Line item <500>

September 4, 2013

Cambridge Telephone Company, Inc. understands and complies with the Idaho Public Utilities Commission's *Telephone Customer Relations Rules*, IDAPA 31.41.01, adopted under the general legal authority of the Public Utilities Law, Chapters 1 through 7, Title 61, Idaho Code, and the Telecommunications Act of 1988, Chapter 6, Title 62, Idaho Code, with regards to service. These telephone customer relations rules provide a set of fair, just, reasonable, and non-discriminatory rules regarding deposits, guarantees, billing, application for service, denial of service, termination of service, complaints to telephone companies, billing for interrupted service, and provisions of certain information about customer to authorities.

#### SAC 47-2215

# **Functionality in Emergency Situations**

Form 481 Line item <600>

September 6, 2013

Pursuant to 47 C.F.R. § 54.313(a)(6) and/or 47 C.F.R § 54.22(b)(4) as set forth in 47 C.F.R § 54.202(a)(2) Cambridge Telephone Company, Inc., meets the requirements to remain functional in emergency situations and has the following capabilities: Back-up power is provided to Cambridge Telephone Company's central and or remote office(s) by use of fixed generator and batteries that provide it with hours of emergency power service. In addition, Cambridge Telephone Company's field electronics have 8 hour back-up battery power, additional backup power with use of fixed/mobile generators. Cambridge Telephone Company, Inc., also has SONET technology in its network that allows for self-healing network should a fiber cut occur in its core network and will automatically reroute traffic. CAMBRIDGE TELEPHONE COMPANY, INC., also has a redundant path within its network to provide for the capability to reroute traffic. Cambridge Telephone Company, Inc., has equipped its remote office with Emergency Stand Alone technology that will provide for call completion and access to 911 in emergency situations. Cambridge Telephone Company, Inc., is capable of managing traffic spikes resulting from emergency situations.



Idaho Telephone Assistance Program (ITSAP) provides a communication "Lifeline" to those who might not otherwise be able to afford telephone service. It also enhances the service for everyone by increasing the number of people who can be reached on the telephone network. A small surcharge is applied to every Idaho telephone line each month to reimburse local telephone companies for the cost of state discounts under ITSAP.

## What type of discount is available?

**Lifeline** assistance lowers the cost of basic, monthly local telephone service. Eligible consumers can receive a Federal flat rate credit of up to \$ 9.25 on each monthly telephone bill. ITSAP provides an additional \$2.50 discount per month for a total of \$11.75 for eligible customers.

**Toll Limitation Service** (TLS) support allows eligible consumers who wish to avoid incurring large long distance fees to choose toll blocking at no cost.

## How do I know whether I am eligible?

Eligibility for Lifeline, Link Up, and TLS support *varies by state*. In Idaho, an individual may be eligible if he or she participates in one of the following programs:

- Medicaid
- Supplemental Nutrition Assistance Program (Food Stamps)
- Supplemental Security Income (SSI)
- Federal Public Housing Assistance
- Low Income Home Energy Assistance
- Temporary Assistance to Needy Families (TANF)
- National School Lunch Program's Free Lunch Program
- Head Start

Eligibility is determined by the total household income that does not exceed 135% of the Federal Poverty Guidelines (FPG).

THE ITSAP DISCOUNT APPLIES TO ONLY ONE TELEPHONE NUMBER PER HOUSEHOLD.

## How do I apply for ITSAP?

Call Health & Welfare - 208-642-6400 or Western Idaho Community Action Program (WICAP) at 208-549-2066. If you are eligible, your name and number will be forwarded to your local telephone company

MORE INFORMATION IS AVAILABLE AT THESE WEBSITES http://www.idahocommunityaction.org Click on

Programs & Idaho Telephone Assistance Service http://www.fcc.gov
Click on

Lifeline: Affordable Phone Service www.lifelinesupport.org

# REDACTED – FOR PUBLIC INSPECTION ATTACHMENT – LINE 3005 REDACTED FOR PUBLIC INSPECTION ATTACHMNET – LINE 3026

ATTACHMENTS REDACTED IN ENTIRETY